

## REQUEST FOR APPLICATIONS

### Screening, Brief Intervention & Referral to Treatment implementation grant for adolescents

<b>RFA Posted</b>	April 7, 2022		
<b>Questions Due</b>	April 25, 2022 @ 5:00pm EST		
<b>Applications Due</b>	May 16, 2022 @ 5:00pm EST		
<b>Anticipated Notice of Award</b>	June 1, 2022		
<b>Anticipated Performance Period</b>	July 1, 2022 – March 14, 2023		
<b>Service</b>	Screening, Brief Intervention & Referral to Treatment (SBIRT) for adolescents		
<b>Issuing Agency</b>	NC Department of Health and Human Services Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (DMH/DD/SAS)		
<b>E-mail Applications and Questions to</b>	DMH Contracts Team	Email	<a href="mailto:RFA.responses@dhhs.nc.gov">RFA.responses@dhhs.nc.gov</a>

**THIS REQUEST FOR APPLICATIONS (RFA)** advertises the Division’s need for the services described herein and solicits applications offering to provide those services pursuant to the specifications, terms and conditions specified herein. All applications received shall be treated as offers to contract. If the Division decides to accept an application, an authorized representative of the Division will sign in the space provided below. Acceptance shall create a contract that is effective as specified below.

**THE UNDERSIGNED HEREBY SUBMITS THE FOLLOWING APPLICATION AND CERTIFIES THAT:** (1) he or she is authorized to bind the named Contractor to the terms of this RFA and Application; (2) the Contractor hereby offers and agrees to provide services in the manner and at the costs described in this RFA and Application; (3) this Application shall be valid for 60 days after the end of the application period in which it is submitted.

### To Be Completed By Contractor:

Contractor Name:	Catchment Area # (see p.5):
Contractor's Street Address:	E-Mail Address:
City, State & Street Address Zip:	Telephone Number:
Name & Title of Authorized Representative:	DUNS Number:
Signature of Authorized Representative:	Date:

### Unsigned or Incomplete Applications Shall Be Returned Without Being Reviewed

<b>NOTICE OF AWARD/FOR NC DHHS USE ONLY:</b> Application accepted and Contract # _____ awarded on _____. The Contract shall begin on _____ and shall terminate on _____.		
By: _____	_____	_____
Signature of Authorized Representative	Printed Name of Authorized Representative	Title of Authorized Representative

### Unsigned or Incomplete Applications Shall Be Returned Without Being Reviewed

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## **1.0 OVERVIEW**

Data from the National Institute on Drug Abuse's (NIDA) Monitoring the Future survey found that the number of adolescents across the country reporting substance use decreased significantly in 2021.<sup>1</sup> Despite this decrease, North Carolina continues to experience a substance use disorder prevalence rate of 3.91% for adolescents (12-17 years old), representing more than 32,000 youth.

SBIRT is an evidence-based "approach to the delivery of early intervention and treatment to people with substance use disorders and those at risk of developing these disorders."<sup>2</sup> SBIRT for adolescents can be implemented in various health care and other related settings (e.g., primary care, school/education, juvenile justice, and dental services).

Through this RFA, DMH/DD/SAS will implement SBIRT in a range of settings that regularly engage with adolescents. Adolescents will be screened for substance use with evidence-based tools and depending on the results of the screening will be provided with a) positive reinforcement, b) a brief intervention, and/or c) a referral to an appropriate substance use disorder (SUD) treatment provider.

The primary goal is to identify adolescent substance use at the earliest opportunity and to provide the most appropriate intervention and/or treatment service. It is anticipated that earlier identification of problematic substance use by adolescents who require formal treatment services will minimize the need for a higher and more restrictive level of care.<sup>3</sup>

The secondary goal is to encourage and support non-behavioral health service providers who regularly interact with adolescents (i.e., education settings, physical health settings including dental services, and other community settings), in establishing and maintaining partnerships with behavioral health (SUD) service providers.

Awardees will use funds to implement an SBIRT approach within their service setting. Required SBIRT Services included in this pilot are outlined in the Scope of work section. All other services not included in the pilot will continue to be reimbursed through the current mechanisms, if applicable.

Implementation sites that can bill Medicaid (under Clinical Coverage policy No 8C: [NC Medicaid 8C](#)) for SBIRT services, or that can bill an alternative funding mechanism will be expected to do so. These sites can use grant funds to support other aspects of SBIRT implementation.

## **1.1 PURPOSE**

The primary purpose of this SBIRT implementation grant is to implement an evidence-based approach that supports early identification of problematic substance use by adolescents and to provide appropriate interventions and referral to treatment services.

To support the primary purpose of the SBIRT implementation grant, implementation sites will be required to establish and maintain partnerships with SUD treatment providers that can provide

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<sup>1</sup> <https://www.nih.gov/news-events/news-releases/percentage-adolescents-reporting-drug-use-decreased-significantly-2021-covid-19-pandemic-endured>

<sup>2</sup> [SAMHSA SBIRT](#)

<sup>3</sup> [Conrad N. Hilton Foundation's Youth Substance Use Prevention and Early Intervention Strategic Initiative](#)

services to adolescents. These partnerships will allow implementation sites to refer adolescents requiring SUD treatment services to a treatment provider in a timely manner.

## **1.2 BACKGROUND**

In collaboration with our partners, NCDHHS works to advance the health, safety, and well-being of all North Carolinians in collaboration with a wide array of partners and stakeholders. Much of this work involves managing the delivery of services to North Carolina's most vulnerable populations, including children, seniors, people with disabilities, and low-income individuals and families.

NCDHHS' 2021-2023 strategic plan<sup>4</sup> aims to "Advance health equity by reducing disparities in opportunity and outcomes for historically marginalized populations within NCDHHS and across the state" (Goal 1) and "Improve child and family well-being so all children have the opportunity to develop their full potential and thrive" (Goal 5), by building "...a strong infrastructure to increase access to child and family well-being services". To that end, NCDHHS DMH/DD/SAS is focusing efforts on expanded access to substance use services for adolescents and improved coordination and partnership between agencies/organizations providing services to adolescents and SUD treatment services.

Adolescents involved in the SBIRT implementation grant are expected to receive a validated, evidence-based, adolescent appropriate 'Screening' for substances, either a positive reinforcement or a 'Brief Intervention' – whichever is appropriate depending on the results of the screening, and a 'Referral to Treatment' if the screening and/or additional data gathered during the brief intervention indicates a potential SUD. This will require SBIRT implementation sites to establish a partnership/s with SUD treatment providers and to coordinate referrals and engagement with treatment.

## **2.0 ELIGIBILITY**

In line with the goal to develop strong infrastructure that allows for expanded access to substance use services, applicant agencies can come from a range of settings including medical, education, behavioral health, juvenile justice, and current SUD treatment providers\*. Applicants must show evidence of collaboration and partnership between SBIRT implementation sites and at least one SUD treatment provider.

An applicant agency must provide a service to adolescents.

Applicant agencies must be non-profit or not-for-profit entities.

An applicant agency will have documented experience with managing state or federal grant funds. Primary care providers, other medical institutions and educational settings will be exempt from this eligibility requirement.

For applicant agencies that receive funding or reimbursement for behavioral health services from Medicaid or a state agency (including DMH/DD/SAS), the applicant should be in good standing with the agency and not currently subject to any investigative or corrective actions. These applicants should also have a current state-funded contract with one or more local management entities /managed care organizations (LME/MCO).

Applicants must demonstrate that they are able to provide the service specifications and standards set forth in this RFA. Award recipients must meet all applicable DMH/DD/SAS regulations and policies, and conditions and requirements for the SABG grant.

Applicants that are currently providing SBIRT services to adolescents will be expected to

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<sup>4</sup> <https://www.ncdhhs.gov/media/13331/download?attachment>

expand capacity and/or enhance current services (i.e., integrating SBIRT with their electronic health records (EHR) system) with these funds. These applicant agencies will be expected to provide a detailed overview of their current SBIRT services, including applicable outcomes, and a comprehensive account for how these implementation funds will be used to enhance services and why these funds are necessary.

All applicant agencies are expected to show proof of a relationship with the MCO and/or Tailored Plan that has responsibility for the geographic area that the applicant agency proposes to implement SBIRT. Applicant agencies can determine the MCO that has responsibility for their geographic area here: [MCO Directory](#)

\* Applications from agencies that are SUD treatment providers will only be considered if the proposal is to locate/embed an individual at another location that does not offer SUD treatment services i.e., SUD treatment provider proposes to locate an individual in a school setting to implement SBIRT. These applicant agencies will be expected to provide a detailed overview of the policies and processes that will be put in place to ensure adolescents requiring referral to treatment will be referred to appropriate SUD services and will not only be referred to the applicant agency.

### **3.0 AWARD INFORMATION**

The award for this RFA is \$300,000 per site for up to five (5) sites for the period of July 1, 2022, through March 14, 2023. Funds are contingent upon availability. Any extension will be contingent upon successful implementation of strategies and deliverables as defined by the implementation sites and agreed upon by the division, as evidenced by the selection of awardees, and contingent upon award of such funds by the federal grantor.

DMH/DD/SAS is also prioritizing geographic location of awardees. DMH/DD/SAS is aiming to select a spread of providers from across the state to ensure greater representation. However, the number and distribution of awards will be based on the applications received, the projected grant cycle budget of applicants and funding availability. Awards will be made based on a thorough review of all submitted complete applications and will be allocated and monitored through DMH/DD/SAS. It is the intent of the division that a successfully implemented project can be customized and replicated across the state.

Cost sharing or matching is not required.

### **3.1 SOURCE OF FUNDS AND PASS THROUGH REQUIREMENTS**

Federal Award Identification Number: 1B08TI083540-01

Federal Award Date: March 11, 2021

Subaward Period of Performance: March 15, 2021 – March 14, 2023

Amount of Federal Funds Obligated by this Action: \$1,500,000

Total Amount of Federal Funds Obligated to the Subrecipient: \$300,000 per site

Total Amount of the Federal Award: \$42,171,280

Federal Award Project Description: The SABG program allows states and territories to plan, implement and evaluate activities to prevent, treat and help more people recover from substance use disorder. This additional funding provides COVID emergency relief funding for the SABG program, in accordance with the Coronavirus Response and Relief Supplement

Appropriations Act, 2021 [P.L. 116-260]. The awarded funds must be used for activities consistent with the SABG program requirements.

Federal Awarding Agency: SAMHSA

DUNS # 8097853630000

CFDA Number: 93.959

CFDA Name: Substance Abuse Prevention and Treatment Block Grant, Coronavirus Response and Relief Supplement Appropriations Act, 2021

### **3.2 FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (FFATA)**

As a subrecipient of federal funds, each selected grant recipient will be required to provide certain information required by the Federal Funding Accountability and Transparency Act (FFATA), including the organization's DUNS number. Please see <https://fedgov.dnb.com/webform> for free registration. Additional information about FFATA is available at <https://www.fsr.gov/>.

### **4.0 DEFINITIONS, ACRONYMS AND ABBREVIATIONS**

Adolescent: An individual age 12-17 years old

DHHS: Department of Health and Human Services

DMH/DD/SAS: Division of Mental Health, Developmental Disabilities and Substance Abuse Services

FSR: Financial Status Report

SUD: Substance use disorder

SBIRT: Screening, Brief Intervention and Referral to treatment

LME/MCO: Local Management Entity/Managed Care Organization

EHR: Electronic Health Record

CCA/DA: Comprehensive Clinical Assessment / Diagnostic Assessment

### **4.1 What is Screening, Brief Intervention and Referral to Treatment (SBIRT)**

SBIRT is a comprehensive and evidence-based "approach to the delivery of early intervention and treatment to people with substance use disorders and those at risk of developing these disorders."<sup>5</sup> SBIRT involves the use of a validated screening tool to assess SUD risk, the provision of a brief intervention to help motivate and change behavior and referral to treatment or other services if necessary.<sup>6</sup>

### **5.0 SCOPE OF WORK**

#### **5.1 Programmatic requirements**

Screening for adolescent substance use should take a universal approach. By adopting a universal approach to screening for adolescent substance use, successful applicant agencies can ensure all adolescents are screened using a validated, evidence-based tool. NIDA reports that screening for adolescent substance use can help normalize discussions regarding

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<sup>5</sup> [SAMHSA SBIRT](#)

<sup>6</sup> [NORC at the University of Chicago. \(2016\). Guide to Adolescent Screening, Brief Intervention and Referral to Treatment \(SBIRT\).](#)

substance use, reinforce and promote healthy behaviors and choices, identify adolescents at risk for SUD and provide brief interventions and referrals for treatment.<sup>7</sup>

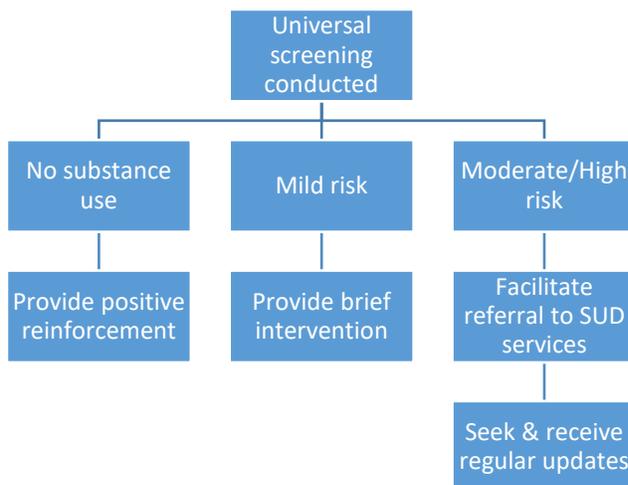
DMH/DD/SAS understands SBIRT to have three core components:

**Screening:** This is the process of assessing substance use risk. The successful applicant agencies will be expected to take a universal approach in administering validated and evidence-based screening tools for adolescent substance use. An overview of adolescent appropriate screening tools can be found here: [NIDA](#)

**Brief Intervention:** This is the process of providing feedback about substance use. The successful applicant agencies will be expected to provide brief interventions that focus on education, increasing insight and awareness, and developing motivation for change. An overview of the brief intervention process and tools can be found here: [Screen and Intervene: New Hampshire SBIRT](#)

**Referral to Treatment:** This is the process of facilitating access to appropriate SUD services for further assessment and/or treatment. The successful applicant agencies will be expected to maintain a relationship with at least one SUD service provider that can assess and provide SUD treatment services to adolescents.

#### Overview of SBIRT core components:



Successful applicants for these funds will have the following expectations:

- Integrate the three core components of SBIRT into existing services
  - o Finalize workflow of SBIRT services
  - o Train agency/organizational staff on SBIRT services
  - o Complete integration of SBIRT into EHR (if applicable)
- Provide SBIRT services to adolescents

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<sup>7</sup> [NIDA: Adolescent SUD screening](#)

- Provide SUD screening for adolescents.
  - Use the screening results to determine if the adolescent requires a positive reinforcement, a brief intervention, or a referral to specialized SUD treatment services for additional assessment.
  - Provide positive reinforcement or brief intervention for adolescents that do not require referral to specialized SUD treatment services.
  - Facilitate referrals to specialized SUD treatment services for adolescents that require additional assessment.
  - Coordinate with specialized SUD treatment services to assist with treatment engagement and retention.
- Educate adolescents and family/caregivers on substance use and SUD
    - Provide educational materials on substance use and SUD to adolescents and families/caregivers
  - Develop a plan of sustainability for services post funding from this award
  - Comply with reporting requirements outlined in section 5.4 of this RFA

## **5.2 POPULATION SERVED**

SBIRT services must be available to any eligible adolescent within the successful applicants agency/organization. Successful applicant agencies are required to provide educational resources to families/caregivers of adolescents involved in their services.

## **5.3 PERFORMANCE STANDARDS AND EXPECTATIONS**

Applicants shall comply with all federal and state requirements for subawards. The [North Carolina State Budget Manual](#) outlines parameters for allowable and unallowable costs at the state level, and the code of federal regulations, title 2, part 200 outlines requirements and restrictions for sub awardees receiving federal awards. Sub awardees must comply with all uniform guidance related to the SABG COVID Supplement funding, CFDA: 93.959.

## **5.4 REPORTING REQUIREMENTS**

The successful applicants will be required to submit a monthly Financial Status Report (FSR), detailed in Section 9.0 of this RFA.

The successful applicants will be expected to collect data on the demographics of the individuals receiving services through this funding, the services provided and the outcomes of services provided. Exact reporting requirements will be finalized upon award of the funds.

For adolescents referred to specialized SUD treatment services, the treatment provider is required to submit data to the North Carolina Treatment Outcomes and Program Performance System and to comply with the pre-set intervals for submitting updates.

The following measures will be used to track program success: number of individuals served; services provided; demographic characteristics; pre-and-post rates of: substance use, employment, housing stability, criminal justice involvement.

## **North Carolina Treatment Outcomes and Program Performance System (NC-TOPPS)**

NC-TOPPS is a web-based system for gathering outcome and performance data on behalf of consumers with mental health and substance use disorders in North Carolina's public system of treatment services. NC-TOPPS provides reliable information that is used to measure the impact of treatment and to improve service and management quality throughout the service system.

NC-TOPPS was launched in 1997 as a partnership between the federal government and the state to implement a system for monitoring and evaluating substance use disorder treatment services. In 2005, mental health services were added, and the system was moved to a web-based format.

NC-TOPPS is based on face-to-face interaction between a consumer and a qualified professional (QP) with the objective of augmenting the clinical assessment process and providing information for the consumer's treatment plan. NC-TOPPS information is gathered through a series of interviews over the course of an episode of care: the period that begins with the initiation of services and ends with the termination of services, as defined in the consumer's treatment plan, or by a lapse in services of more than sixty days.

Initial, Update and Episode Completion Interviews are designed to assist in assessing the effectiveness of treatment. QPs conducting interviews use the NC-TOPPS web-based system to compile data on consumer outcomes such as symptom reduction, employment, education, retention, housing, family support and criminal justice. Recovery Follow-Up Interviews are optional, but available to conduct an interview with a consumer at any time after an episode of care.

More information can be found at <https://nctopps.ncdmh.net/dev/GettingStartedWithNCTOPPS.asp>.

## **5.5 QUALIFICATIONS AND CAPACITY**

Sub awardees must have internal controls in place and use generally accepted accounting principles (GAAP). Successful applicants will show no more than two audit findings in their most recent audit. Successful applicants will have a proven track record of collaboration with community partners to better assure sufficient resources are available to individuals to meet treatment and recovery needs.

## **6.0 PERFORMANCE OVERSIGHT**

DMH/DD/SAS assumes responsibility for monitoring the performance of the selected applicants and the outcomes of these projects.

## **7.0 TERM OF AWARD, OPTIONS TO EXTEND**

The performance period for this project begins July 1, 2022 and ends March 14, 2023. These applications will be supported with funds from the SABG ARPA funding. Any extension of funding or the funding period will be determined by the availability of funds and status of goals and outcomes.

## **8.0 BUDGET**

The line-item budget shall constitute the total cost to DMH/DD/SAS for the complete performance in accordance with the requirements and specifications herein, including all applicable expenses such as administrative cost. The applicants shall not invoice for any amounts not specifically allowed for in the line-item budget of this RFA.

For applicants that are not able to bill Medicaid or other funding mechanisms for SBIRT services, the total budget is inclusive of the following services:

- Administration of an appropriate evidence-based adolescent SUD screening tool
- Review of the screening tool
- Provision of positive reinforcement, a brief intervention and/or referral to a specialized SUD treatment service
- Education on substance use and SUD to adolescents and/or family members/caregivers

All applicants must include in their budget, the expected number of individuals to be served.

Other services, such as those provided by a physician, PA or NP, including approved Evaluation and Management (E&M) codes, as well as the comprehensive clinical assessment performed by a licensed clinician, may be billed separately and outside the proposed budget. Additionally, services provided by a specialized SUD treatment provider may be billed separately, provided the patient meets medical necessity criteria for these services/levels of care.

For applicants that can bill Medicaid for SBIRT services (under Clinical Coverage policy No 8C: [NC Medicaid 8C](#)), please review the DHHS Joint Communication Bulletin from January 2021, that provides detail on who can bill for SBIRT CPT codes: [Addition of provider types for SBIRT in primary care](#). Additionally, services provided to an individual with any other type of insurance, those services should be billed to that payor.

## **9.0 REIMBURSEMENT**

Upon award, a contract will be executed between NCDHHS and the awardee. Funds associated with this RFA will be provided to the successful applicants on a reimbursement basis. The successful applicants will be required to submit a Financial Status Report (FSR) by the 10th of each following month, detailing expenditures during the reporting period. The FSR will be reviewed by the contract administrator against the approved budget. The FSR will then be processed for reimbursement.

## **10.0 THE SOLICITATION PROCESS**

The following is a general description of the process by which agencies or organizations will be selected to complete the goal or objective.

- 1) Written questions concerning the RFA specifications will be received until the date specified on the cover sheet of this RFA. A summary of all questions and answers will be posted on the RFA website.
- 2) Applications will be received from each agency or organization. The original must be signed and dated by an official authorized to bind the agency or organization.
- 3) All applications must be received by the funding agency not later than the date and time specified on the cover sheet of the RFA. Faxed applications will not be accepted.
- 4) Applications from each responding agency and organization will be logged in at the date and time received.
- 5) At their option, the evaluators may request additional information from any or all Applicants for the purpose of clarification or to amplify the materials presented in any part of the application. However, agencies and organizations are cautioned that the evaluators are not required to request clarification: therefore, all applications should be complete and reflect the most favorable terms available from the agency or

organization.

- 6) Applications will be evaluated according to completeness, content, experience with similar projects, ability of the agency's or organization's staff, cost, etc. The award of a grant to one agency and organization does not mean that the other applications lacked merit, but that, all facts considered, the selected application was deemed to provide the best service to the State.
- 7) Agencies and organizations are cautioned that this is a request for applications, and the funding agency reserves the unqualified right to reject any and all applications when such rejections are deemed to be in the best interest of the funding agency.

## **11.0 GENERAL INFORMATION ON SUBMITTING APPLICATIONS**

- 1) Award or Rejection  
All qualified applications will be evaluated and awarded to those agencies or organizations whose capabilities are deemed to be in the best interest of the funding agency. The funding agency reserves the unqualified right to reject any or all offers if determined to be in its best interest. Successful Contractors will be notified no later than June 1, 2022.
- 2) Cost of Application Preparation  
Any cost incurred by an agency or organization in preparing or submitting an application is the agencies or organizations sole responsibility; the funding agency will not reimburse any agency or organization for any pre-award costs incurred.
- 3) Elaborate Applications  
Elaborate applications in the form of brochures or other presentations beyond that necessary to present a complete and effective application are not desired.
- 4) Oral Explanations  
The funding agency will not be bound by oral explanations or instructions given at any time during the competitive process or after awarding the grant.
- 5) Reference to Other Data  
Only information that is received in response to this RFA will be evaluated; reference to information previously submitted will not suffice.
- 6) Titles  
Titles and headings in this RFA and any subsequent RFA are for convenience only and shall have no binding force or effect.
- 7) Form of Application  
Each application must be submitted on the form provided by the funding agency.
- 8) Exceptions  
All applications are subject to the terms and conditions outlined herein. All responses will be controlled by such terms and conditions. The attachment of other terms and condition by any agency and organization may be grounds for rejection of that agency or organization's application.
- 9) Advertising  
In submitting its application, agencies and organizations agree not to use the results therefrom or as part of any news release or commercial advertising without prior written approval of the funding agency.

- 10) Right to Submitted Material  
All responses, inquiries, or correspondence relating to or in reference to the RFA, and all other reports, charts, displays, schedules, exhibits, and other documentation submitted by the agency or organization will become the property of the funding agency when received.
- 11) Competitive Offer  
Pursuant to the provision of G.S. 143-54, and under penalty of perjury, the signer of any application submitted in response to this RFA thereby certifies that this application has not been arrived at collusively or otherwise in violation of either Federal or North Carolina antitrust laws.
- 12) Agency and Organization's Representative  
Each agency or organization shall submit with its application the name, address, and telephone number of the person(s) with authority to bind the agency or organization and answer questions or provide clarification concerning the application.
- 13) Subcontracting  
Agencies and organizations may propose to subcontract portions of work provided that their applications clearly indicate the scope of the work to be subcontracted, and to whom. All information required about the prime grantee is also required for each proposed subcontractor.
- 14) Proprietary Information  
Trade secrets or similar proprietary data which the agency or organization does not wish disclosed to other than personnel involved in the evaluation will be kept confidential to the extent permitted by NCAC TO1: 05B.1501 and G.S. 132-1.3 if identified as follows: Each page shall be identified in boldface at the top and bottom as "CONFIDENTIAL." Any section of the application that is to remain confidential shall also be so marked in boldface on the title page of that section.
- 15) Participation Encouraged  
Pursuant to Article 3 and 3C, Chapter 143 of the North Carolina General Statutes and Executive Order No. 77, the funding agency invites and encourages participation in this RFA by businesses owned by minorities, women and the disabled including utilization as subcontractor(s) to perform functions under this Request for Applications.
- 16) Federal Certifications
  - i) Agencies or organizations receiving Federal funds will be required to execute Federal Certifications regarding Non-discrimination, Drug-Free Workplace, Environmental Tobacco Smoke, Debarment, Lobbying, and Lobbying Activities. A copy of the Federal Certifications is included in this RFA for your reference (see Appendix B). Federal Certifications should NOT be signed or returned with the application.

## **12.0 APPLICATION CONTENT AND INSTRUCTIONS**

This section includes what the applicants are required to provide the Division with its application response. *The applicants must clearly demonstrate (describe) in its proposal response* how the applicant's organization will meet or address the programmatic requirements described in the scope of work section of the RFA. The applicants proposal shall include the following items in this specific order and clearly marked as such. Applications must be 20 pages or less, not including any attachments or appendices. See each section below for detailed information.

Whenever possible, use appendices to provide details, supplementary data, references, and information requiring in-depth analysis. These types of data, although supportive of the proposal, if included in the body of the design, could detract from its readability. Appendices provide the proposal reader with immediate access to details if clarification of an idea, sequence or conclusion is required. Timetables, work plans, schedules, activities, and methodologies, legal papers, personal vitae, letters of support, and endorsements are examples of appendices.

Applicants shall populate all attachments of this RFA that require the applicants to provide information and include an authorized signature where requested. Applicants RFA responses shall include the following items and those attachments should be arranged in the following order: Number each page consecutively. (Please provide the order of arrangement and content and page count if applicable).

**A. Cover Page (at the beginning of this RFA) with all fields completed, signed by an authorized official of the Applicant organization (not inclusive in the 20-page limit)**

**B. Face Page**

- 1) The Applicant's name, principal place of business and location where these services will be provided, if different.
- 2) The Applicant's legal status: Confirmation that the applicant is a nonprofit or not-for-profit.

**C. Proposal Summary (5 points)**

The summary should be prepared after the application has been developed to encompass all the key points necessary to communicate the objectives of the project. It is the document that becomes the cornerstone of the proposal, and the initial impression it gives will be critical to success of the venture. In many cases, the summary will be the first part of the proposal package seen by the agency and very possible could be the only part of the package that is carefully reviewed before the decision is made to consider the project any further.

**D. Organization Background and Qualifications (5 points)**

Describe the organization and its qualifications for funding including:

- 1) Mission and goal of the Organization.
- 2) A brief overview of the applicant's history.
- 3) Describe the applicant's experience with providing the service, working with the behavioral health system and cross-system partnerships (organizations past achievements and accomplishments and evidence of its impact).
- 4) Brief overview of all services provided by the applicant within the last five years, including (if applicable):
  - a) The beginning and ending dates of any contracts.
  - b) The services provided under those contracts.
  - c) The total number of applicant employees assigned to service each contract.
  - d) Whether any of those contracts were extended or renewed at the end of their initial terms.
  - e) Whether any of those contracts were terminated early for cause by either party to the contract.
  - f) The "lessons learned" from each of those contracts.
- 5) Qualifications/background on organization's Board of Directors and Key Staff.
- 6) Provide evidence of partnerships with other relevant agencies.

- 7) The details of:
  - a) Any criminal investigations pending against the applicant or any of their officers, directors, employees, agents, or subcontractors of which the applicants have knowledge or a statement that there are none.
  - b) Any regulatory sanctions levied against any of the applicants or any of their officers, directors, employees, agents, or subcontractors by any state or federal regulatory agencies within the past three years of which the applicants have knowledge or a statement that there are none. As used herein, the term “regulatory sanctions” includes the revocation or suspension of any license or certification, the levying of any monetary penalties or fines, and the issuance of any written warnings.
  - c) Any regulatory investigations pending against of any of the applicants or any of their officers, directors, employees, agents, or subcontractors by any state or federal regulatory agencies of which the applicants have knowledge or a statement that there are none.  
Note: The Department may reject a proposal solely based on this information.
  - d) Any of the applicant’s directors, partners, proprietors, officers, or employees or any of the proposed project staff are related to any DHHS employees. If such relationships exist, identify the related individuals, describe their relationships, and identify their respective employers and positions.
  - e) Assurance that the applicant and the proposed applicant staff are not excluded from participation by Medicaid or the Office of the Inspector General of the United States Department of Health and Human Services.
- 8) Other major donors and summary of dollar amounts of contribution(s).

**E. Assessment of Need/s (Problem Statement) (10 points)**

- 1) Problem (explain why the service is necessary).
- 2) Describe what your organization is currently doing to address this problem.
- 3) Primary Counties Served.
- 4) Ethnicity, age, and gender of population served.
- 5) Target population or who are you plan on serving.
- 6) Number of youths to be served.
- 7) Eligibility requirements to receive service.
- 8) Statistical facts and figures (national, state, local).
- 9) Program website.

**F. Project Description and Narrative (30 points)**

- 1) Describe the proposed project. This should include detail on the proposed SBIRT workflow, the evidence-based screening tool/s that will be used, the types of evidence-based brief interventions to be offered, the mechanisms for referral to specialized SUD treatment services, training that agency staff will receive to support SBIRT implementation, and the anticipated number of adolescents to receive services under this grant (elaborate on how the anticipated number of adolescents to be served was chosen).
- 2) Describe how the proposed project will address health equity for historically marginalized populations and how the proposed project supports the development of strong infrastructure to improve access to quality services.
- 3) Explain how you engaged the priority population in developing this proposed project.

- 4) Detail how this project will address the community's and organization's needs.
- 5) List the goals, objectives, and anticipated outcomes of the project.
- 6) Include timelines for project implementation with specific program objectives as they relate to performance measures and budget (e.g., hiring staff or contractors, determining services to be provided, engaging participants, etc.).
- 7) Identify potential challenges the project may face (regulatory, environmental, or other constraints) and discuss how these challenges will be addressed and/or minimized.
- 8) Provide a comprehensive understanding of SBIRT and the requirements in this RFA.

### **G. Collaboration and Community Support (20 points)**

For applicants that do not provide SUD treatment services, the RFA requires that there is a documented relationship between the applicant agency and at least one community-based SUD treatment provider.

Proof that such a relationship exists between the applicant agency and a community-based SUD treatment provider should be attached to the application as an appendix (please acknowledge the relationship in this section of the application and direct the reviewer to the appendix for additional detail). The proof provided should outline the following:

- 1) How an adolescent with a potential SUD is identified and referred to the SUD treatment provider.
- 2) Timeframes that the SUD treatment provider must meet when scheduling an initial appointment (Best practice indicates an adolescent should be offered an initial appointment within 7 calendar days). How will the provider document and share their efforts to schedule an initial appointment for data reporting?
- 3) Insurance's accepted by the SUD treatment provider and the process for adolescents without insurance coverage.
- 4) Information sharing protocols\*. Applicant agencies may be interested in receiving the outcome of any CCA/DA (primarily any treatment recommendation and diagnosis code/s), whether the adolescent agreed to follow/participate in any treatment recommendation, brief updates on treatment progress (attendance and compliance with treatment plan), if the adolescent is at risk of being discharged unsuccessfully, and any discharge/aftercare plans. Applicant agencies may also wish to be involved in the discharge planning process, so that they are aware of any aftercare needs.
- 5) Confirmation that the SUD treatment provider is registered with the NCTOPPS system and will complete the NCTOPPS reporting at the preset intervals.

\* Information sharing is a potential tension point between applicant agencies and SUD treatment providers. SUD treatment providers are required to follow various federal, state and licensing regulations (42 CFR part 2 & HIPAA etc.) that dictate what information they can share, who they can share information with and the mechanisms that can be used to share that information. **Applicants are required to outline how this challenge will be addressed and/or minimized if not already outlined in the relationship proof that is submitted.**

All applicant agencies should

- 1) Describe how they will collaborate on this project with other relevant organizations in the community, and/or how this project will improve the collaboration between local stakeholders.

- 2) Describe the reasons for partnering with specific organizations.
- 3) Describe how you will verify that projects or services are not being duplicated in the community and with the population served.

Letters of support that involve collaboration should be included with your grant application as an appendix and will not count toward the narrative page limit of this RFA. Please do not have letters sent separately to the Division. They will not be included in your application and will not be read by reviewers.

#### **H. Potential Impact (10 points)**

Explain why the proposed project is a good use of federal dollars. Describe the potential health impact and other effects on your community and its residents. Use research on program outcomes to identify what works. Whenever possible, quantify the possible economic savings and/or gains brought about by the project through program specific data.

#### **I. Organizational Sustainability (10 points)**

Describe how the project will contribute to the capacity of your organization or your community to address adolescent substance use. Applicants must describe how the enhancements, improvements, or increases achieved during the project may be sustained past the funding term. Describe obstacles that may affect your organization's ability to sustain this program after the grant cycle and potential solutions to these identified challenges.

#### **J. Line-Item Budget and Budget Narrative (10 points)**

Line-Item budget: Appendix C is a line-item budget template that is to be submitted with this RFA. This does not count towards the page limit of this RFA.

Budget Narrative: The budget narrative should be included in the body of the proposal and will count towards the page limit of this RFA.

Every item that appears in the budget should be explained clearly, so the evaluator/ reviewer will understand it. The budget narrative should explain how the numbers in the budget were calculated and how each expense is related to the proposed project. The Budget Narrative is the justification of 'how' and/or 'why' a line item helps to meet the program deliverables. It is also used to determine if the cost in the contract is reasonable and permissible.

The budget should be for the period July 1<sup>st</sup>, 2022, through March 14<sup>th</sup>, 2023. The budget is required to follow the state fiscal year. As such, the proposed budget should cover the following periods: July 1<sup>st</sup>, 2022 – March 14<sup>th</sup>, 2023.

- Salary Detail – Staff salaries and expenses for temporary/contract staff should be entered by position type in the appropriate section. For employed staff and temporary/contract staff, enter the average number of hours to be worked per week for each position type on the project.
- Summary – Detailed cost breakdown for the project and all sources of funding identified for the project.
- Narrative – Expanded details on line items in the budget.

Funds may not be used for purchase of land or buildings, nor may extensive renovations be

completed with these funds. Equipment, such as computers, may be purchased with these funds if the cost is less than \$5,000.00.

**K. Supporting Documents (not inclusive of the 20-page limit)**

- 1) An organizational chart identifying the personnel who will be assigned to work on this project.
- 2) Letters of support from key partners, including any proposed sub awardees.
- 3) Applicable Terms and Conditions (select and attach the appropriate Terms and Conditions for your organization type from Appendix A).
- 4) Applicable Certifications from Appendix B.
- 5) Other documents outlined above.

**Submit complete Application, including signature of authorized representative, to [RFA.responses@dhhs.nc.gov](mailto:RFA.responses@dhhs.nc.gov) no later than 5:00 pm EST on Monday, May 16<sup>th</sup>, 2022.**

**13.0 EVALUATION CRITERIA AND SCORING**

**PHASE I: INITIAL QUALIFYING CRITERIA**

The applicant’s proposal must meet all the following Phase I application acceptance criteria in order to be considered for further evaluation. Any proposal receiving a “no” response to any of the following qualifying criteria shall be disqualified from consideration.

ITEM	APPLICATION ACCEPTANCE CRITERIA	RFA Section	YES	NO
1	Was the contractor’s application received by the deadline specified in the RFA?			
2	Proposal includes all required affirmative statements, assurances and certifications signed by the vendor’s responsible representative, as described in Appendix B of the RFA			
3	Included in those certifications, the contractor states that it is not excluded from entering a contract with DHHS/State due to restrictions related to the federal debarment list, etc.			
4	Vendor meets eligibility requirements as stated in Section 2.0			
5	Vendor meets the minimum Qualification Requirements as described in Section 5.5			
6	Program’s review of the Contractor verifies that the vendor is not excluded from contracting with DHHS/State for any unresolved finding for recovery			

## PHASE II: CRITERIA FOR SCORING PROPOSAL/APPLICATIONS

Qualifying application proposals will be collectively scored by the proposal review team. All qualified applications will be evaluated, and awards made based on the following criteria considered, to result in awards most advantageous to the State. Applications will be scored on the content, quality, and completeness of the responses to the items in the scope of work and to how well each response addresses the following core factors. DHHS will consider scores, organizational capacity, and distribution among catchment areas, and variety of quality improvement plans in determining awards. Please note that Contractors not meeting the eligibility requirements or any of the minimum or mandatory requirements as stated in Phase I will not be scored.

<b>Evaluation Criteria</b>	<b>Score</b>
Proposal Summary	5 points
Organizational Background and Qualifications	5 points
Assessment of Need / Approach to the Project	10 points
Project Description and Narrative	25 points
Collaboration and Community Support	20 points
Potential Impact	10 points
Organizational Stability	10 points
Line-Item Budget/Budget Narrative	10 points
Supporting Documentation	5 points
<b>Total Possible Score</b>	<b>100 points</b>

### **14.0 SBIRT RESOURCES**

The following is a list of various SBIRT resources. This list is not a complete or comprehensive collection of resources and should not be used as the sole source of information related to SBIRT. The resources listed below are provided to aid applicants in understanding what implementing SBIRT entails and in structuring their proposal within a SBIRT framework.

Massachusetts Child Psychiatry Access Project: [Adolescent SBIRT Toolkit](#)

National Council for Mental Wellbeing: [Youth SBIRT](#)

NORC at the University of Chicago: [Learner's Guide to Adolescent SBIRT](#)

Journal of Substance Abuse Treatment: [Adapting SBIRT to adolescent primary care: SBIRT-A](#)

Institute for Research, Education and Training in Addictions: [Resource list](#)

University of Missouri-Kansas City: [Resource list](#)

Addiction Technology Transfer Center Network: [Introduction to SBIRT](#)

SAMHSA: [Resource list](#)

SBIRT Colorado: [Resource list](#)

**Appendix A – Applicable Terms & Conditions**

**Conflict of Interest Verification (Annual)**

We, the undersigned entity, hereby testify that our Organization’s Conflict of Interest Acknowledgement and Policy adopted by the Board of Directors/Trustees or other governing body, is on file with the North Carolina Department of Health and Human Services (DHHS). If any changes are made to the Conflict of Interest Policy, we will submit a new Conflict of Interest Acknowledgment and Policy to the Department (DHHS).

<hr/>	
Name of Organization	
<hr/>	
Contractor’s Authorized Agent	Date
<hr/>	
Printed Name of Contractor’s Authorized Agent	Title
<hr/>	
Signature of Witness	Date
<hr/>	
Printed Name of Witness	Title

**Appendix B – Applicable Certifications**

**FEDERAL CERTIFICATIONS**

**The undersigned states that:**

1. He or she is the duly authorized representative of the Provider named below;
2. He or she is authorized to make, and does hereby make, the following certifications on behalf of the Provider, as set out herein:
  - a. The Certification Regarding Nondiscrimination;
  - b. The Certification Regarding Drug-Free Workplace Requirements;
  - c. The Certification Regarding Environmental Tobacco Smoke;
  - d. The Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions; and
  - e. The Certification Regarding Lobbying;
3. He or she has completed the Certification Regarding Drug-Free Workplace Requirements by providing the addresses at which the contract work will be performed;
4. [Check the applicable statement]
  - [ ] He or she **has completed** the attached **Disclosure Of Lobbying Activities** because the Provider **has made, or has an agreement to make**, a payment to a lobbying entity for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action;
  - OR**
  - [ ] He or she **has not completed** the attached **Disclosure Of Lobbying Activities** because the Provider **has not made, and has no agreement to make**, any payment to any lobbying entity for influencing or attempting to influence any officer or employee of any agency, any Member of Congress, any officer or employee of Congress, or any employee of a Member of Congress in connection with a covered Federal action.
5. The Provider shall require its subcontractors, if any, to make the same certifications and disclosure.

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**Signature** **Title**

---

**Provider Name** **Date**

**[This Certification Must be Signed by the Same Individual Who Signed the Proposal Execution Page]**

**I. Certification Regarding Nondiscrimination**

**The Provider certifies** that it will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g)

Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (h) the Food Stamp Act and USDA policy, which prohibit discrimination on the basis of religion and political beliefs; and (i) the requirements of any other nondiscrimination statutes which may apply to this Agreement.

**II. Certification Regarding Drug-Free Workplace Requirements**

1. The Provider certifies that it will provide a drug-free workplace by:
  - a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the Provider’s workplace and specifying the actions that will be taken against employees for violation of such prohibition;
  - b. Establishing a drug-free awareness program to inform employees about:
    - i. The dangers of drug abuse in the workplace;
    - ii. The Provider’s policy of maintaining a drug-free workplace;
    - iii. Any available drug counseling, rehabilitation, and employee assistance programs; and
    - iv. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
  - c. Making it a requirement that each employee be engaged in the performance of the agreement be given a copy of the statement required by paragraph (a);
  - d. Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the agreement, the employee will:
    - i. Abide by the terms of the statement; and
    - ii. Notify the employer of any criminal drug statute conviction for a violation occurring in the workplace no later than five days after such conviction;
  - e. Notifying the Department within ten days after receiving notice under subparagraph (d)(ii) from an employee or otherwise receiving actual notice of such conviction;
  - f. Taking one of the following actions, within 30 days of receiving notice under subparagraph (d)(ii), with respect to any employee who is so convicted:
    - i. Taking appropriate personnel action against such an employee, up to and including termination; or
    - ii. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency; and
  - g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).
2. The sites for the performance of work done in connection with the specific agreement are listed below (list all sites; add additional pages if necessary):

**Address**

Street

---

City, State, Zip Code

---

3. Provider will inform the Department of any additional sites for performance of work under this agreement.

4. False certification or violation of the certification may be grounds for suspension of payment, suspension or termination of grants, or government-wide Federal suspension or debarment. 45 C.F.R. 82.510.

### **III. Certification Regarding Environmental Tobacco Smoke**

Public Law 103-227, Part C-Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000.00 per day and/or the imposition of an administrative compliance order on the responsible entity.

**The Provider certifies** that it will comply with the requirements of the Act. The Provider further agrees that it will require the language of this certification be included in any subawards that contain provisions for children's services and that all subgrantees shall certify accordingly.

### **IV. Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion Lower Tier Covered Transactions**

#### **Instructions**

[The phrase "prospective lower tier participant" means the Provider.]

1. By signing and submitting this document, the prospective lower tier participant is providing the certification set out below.
2. The certification in this clause is a material representation of the fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originate may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant will provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549, 45 CFR Part 76. You may contact the person to whom this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter any lower tier covered transaction with a person who is debarred, suspended, determined ineligible or voluntarily excluded from participation in this covered transaction unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this document that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized in paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension, and/or debarment.

### **Certification**

1. **The prospective lower tier participant certifies**, by submission of this document, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
2. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

### **V. Certification Regarding Lobbying**

**The Provider certifies**, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federally funded contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form SF-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award document for subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) who receive federal funds of \$100,000.00 or more and that all subrecipients shall certify and disclose accordingly.
4. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000.00 and not more than \$100,000.00 for each such failure.

## VI. Disclosure Of Lobbying Activities

### Instructions

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Use the SF-LLL-A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or sub-award recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in Item 4 checks "Subawardee", then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (Item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal Identifying number available for the Federal action identified in Item 1 (e.g., Request for Proposal (RFP) number, Invitation for Bid (IFB) number, grant announcement number, the contract grant, or loan award number, the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in Item 4 or 5.
10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in Item 4 to influence the covered Federal action.  
(b) Enter the full names of the individual(s) performing services, and include full address if different from 10(a). Enter Last Name, First Name and Middle Initial (MI).

11. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (Item 4) to the lobbying entity (Item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
12. Check the appropriate boxes. Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
13. Check the appropriate boxes. Check all boxes that apply. If other, specify nature.
14. Provide a specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services rendered. Include all preparatory and related activity, not just time spent in actual contact with Federal officials. Identify the Federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
15. Check whether or not a SF-LLL-A Continuation Sheet(s) is attached.
16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, D. C. 20503

**Disclosure Of Lobbying Activities  
(Approved by OMB 0344-0046)**

**Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352**

<p>1. Type of Federal Action:</p> <p><input type="checkbox"/> a. contract</p> <p><input type="checkbox"/> b. grant</p> <p><input type="checkbox"/> c. cooperative agreement</p> <p><input type="checkbox"/> d. loan</p> <p><input type="checkbox"/> e. loan guarantee</p> <p><input type="checkbox"/> f. loan insurance</p>	<p>2. Status of Federal Action:</p> <p><input type="checkbox"/> a. Bid/offer/application</p> <p><input type="checkbox"/> b. Initial Award</p> <p><input type="checkbox"/> c. Post-Award</p>	<p>3. Report Type:</p> <p><input type="checkbox"/> a. initial filing</p> <p><input type="checkbox"/> b. material change</p> <p><b>For Material Change Only:</b></p> <p>Year _____ Quarter _____</p> <p>Date Of Last Report: _____</p>
<p>4. Name and Address of Reporting Entity:</p> <p><input type="checkbox"/> Prime</p> <p><input type="checkbox"/> Subawardee Tier (if known) _____</p> <p>Congressional District (if known) _____</p>	<p>5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime:</p> <p>Congressional District (if known) _____</p>	
<p>6. Federal Department/Agency:</p>	<p>7. Federal Program Name/Description:</p> <p>CFDA Number (if applicable) _____</p>	
<p>8. Federal Action Number (if known)</p>	<p>9. Award Amount (if known) \$ _____</p>	
<p>10. a. Name and Address of Lobbying Entity (if individual, last name, first name, MI):</p> <p align="center"><i>(attach Continuation Sheet(s) SF-LLL-A, if necessary)</i></p>	<p>b. Individuals Performing Services (including address if different from No. 10a.) (last name, first name, MI):</p> <p align="center"><i>(attach Continuation Sheet(s) SF-LLL-A, if necessary)</i></p>	
<p>11. Amount of Payment (check all that apply):</p> <p>\$ _____ <input type="checkbox"/> actual <input type="checkbox"/> planned</p>	<p>13. Type of Payment (check all that apply):</p> <p><input type="checkbox"/> a. retainer</p> <p><input type="checkbox"/> b. one-time fee</p> <p><input type="checkbox"/> c. commission</p> <p><input type="checkbox"/> d. contingent fee</p> <p><input type="checkbox"/> e. deferred</p> <p><input type="checkbox"/> f. other; specify: _____</p>	
<p>12. Form of Payment (check all that apply):</p> <p><input type="checkbox"/> a. cash</p> <p><input type="checkbox"/> b. In-kind; specify: Nature _____</p> <p align="center">Value _____</p>		
<p>14. Brief Description of Services Performed or to be Performed and Date(s) of Services, including officer(s), employee(s), or Member(s) contacted, for Payment Indicated in Item 11 (attach Continuation Sheet(s) SF-LLL-A, if necessary):</p>		
<p>15. Continuation Sheet(s) SF-LLL-A attached: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>16. Information requested through this form is authorized by title 31 U. S. C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U. S. C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.</p>	<p>Signature: _____</p> <p>Print Name: _____</p> <p>Title: _____</p> <p>Telephone No: _____ Date: _____</p>	
<p>Federal Use Only</p>		<p>Authorized for Local Reproduction Standard Form - LLL</p>

**IRS Tax Exemption Verification Form (Annual)**

We, the undersigned entity, hereby testify that the 501 (c) (3) status is on file with the North Carolina Department of Health and Human Services is still in effect.

Name of Agency \_\_\_\_\_

\_\_\_\_\_  
Chairman, Executive Director, or other Authorized Official

Sworn to and subscribed before me, this \_\_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission expires: \_\_\_\_\_

**STATE GRANT CERTIFICATION – NO OVERDUE TAX DEBTS**

**Instructions:** Grantee/Provider should complete this certification for all state funds received. Entity should enter appropriate data in the yellow highlighted areas. The completed and signed form should be provided to the state agency funding the grant to be attached to the contract for the grant funds. A copy of this form, along with the completed contract, should be kept by the funding agency and available for review by the Office of State Budget and Management.

**Entity’s Letterhead**

**[Date of Certification (mmddyyyy)]**

To: State Agency Head and Chief Fiscal Officer

**Certification:**

We certify that the [insert organization’s name] does not have any overdue tax debts, as defined by N.C.G.S. 105-243.1, at the federal, State, or local level. We further understand that any person who makes a false statement in violation of N.C.G.S. 143C-6-23(c) is guilty of a criminal offense punishable as provided by N.C.G.S. 143-34(b).

**Sworn Statement:**

[Name of Board Chair] and [Name of Second Authorizing Official] being duly sworn, say that we are the Board Chair and [Title of the Second Authorizing Official], respectively, of [insert name of organization] of [City] in the State of [Name of State]; and that the foregoing certification is true, accurate and complete to the best of our knowledge and was made and subscribed by us. We also acknowledge and understand that any misuse of State funds will be reported to the appropriate authorities for further action.

\_\_\_\_\_  
Board Chair

\_\_\_\_\_  
Title of Second Authorizing Official

Sworn to and subscribed before me on the day of the date of said certification.

\_\_\_\_\_  
(Notary Signature and Seal)

My Commission Expires: \_\_\_\_\_

If there are any questions, please contact the state agency that provided your grant. If needed, you may contact the North Carolina Office of State Budget and Management: [NCGrants@osbm.nc.gov](mailto:NCGrants@osbm.nc.gov) (919)807-4795

<sup>1</sup> G.S. 105-243.1 defines: Overdue tax debt. – Any part of a tax debt that remains unpaid 90 days or more after the notice of final assessment was mailed to the taxpayer. The term does not include a tax debt; however, if the taxpayer entered into an installment agreement for the tax debt under G.S. 105-237 within 90 days after the notice of final assessment was mailed and has not failed to make any payments due under the installment agreement.

## State Certifications

### Contractor Certifications Required by North Carolina Law

**Instructions:** The person who signs this document should read the text of the statutes and Executive Order listed below and consult with counsel and other knowledgeable persons before signing. The text of each North Carolina General Statute and of the Executive Order can be found online at:

- Article 2 of Chapter 64: [http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/ByArticle/Chapter\\_64/Article\\_2.pdf](http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/ByArticle/Chapter_64/Article_2.pdf)
- G.S. 133-32: <http://www.ncga.state.nc.us/gascripts/statutes/statutelookup.pl?statute=133-32>
- Executive Order No. 24 (Perdue, Gov., Oct. 1, 2009): <http://www.ethicscommission.nc.gov/library/pdfs/Laws/EO24.pdf>
- G.S. 105-164.8(b): [http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter\\_105/GS\\_105-164.8.pdf](http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter_105/GS_105-164.8.pdf)
- G.S. 143-48.5: [http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/BySection/Chapter\\_143/GS\\_143-48.5.html](http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/BySection/Chapter_143/GS_143-48.5.html)
- G.S. 143-59.1: [http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter\\_143/GS\\_143-59.1.pdf](http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter_143/GS_143-59.1.pdf)
- G.S. 143-59.2: [http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter\\_143/GS\\_143-59.2.pdf](http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter_143/GS_143-59.2.pdf)
- G.S. 143-133.3: [http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/BySection/Chapter\\_143/GS\\_143-133.3.html](http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/BySection/Chapter_143/GS_143-133.3.html)
- G.S. 143B-139.6C: [http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter\\_143B/GS\\_143B-139.6C.pdf](http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter_143B/GS_143B-139.6C.pdf)

### Certifications

- (1) Pursuant to G.S. 133-32 and Executive Order No. 24 (Perdue, Gov., Oct. 1, 2009), the undersigned hereby certifies that the Contractor named below is in compliance with, and has not violated, the provisions of either said statute or Executive Order.
- (2) Pursuant to G.S. 143-48.5 and G.S. 143-133.3, the undersigned hereby certifies that the Contractor named below, and the Contractor's subcontractors, complies with the requirements of Article 2 of Chapter 64 of the NC General Statutes, including the requirement for each employer with more than 25 employees in North Carolina to verify the work authorization of its employees through the federal E-Verify system." E-Verify System Link: [www.uscis.gov](http://www.uscis.gov)
- (3) Pursuant to G.S. 143-59.1(b), the undersigned hereby certifies that the Contractor named below is not an "ineligible Contractor" as set forth in G.S. 143-59.1(a) because:
- (a) Neither the Contractor nor any of its affiliates has refused to collect the use tax levied under Article 5 of Chapter 105 of the General Statutes on its sales delivered to North Carolina when the sales met one or more of the conditions of G.S. 105-164.8(b); **and**
- (b) [check **one** of the following boxes]
- Neither the Contractor nor any of its affiliates has incorporated or reincorporated in a "tax haven country" as set forth in G.S. 143-59.1(c)(2) after December 31, 2001; **or**
- The Contractor or one of its affiliates **has** incorporated or reincorporated in a "tax haven country" as set forth in G.S. 143-59.1(c)(2) after December 31, 2001 **but** the United States is not the principal market for the public trading of the stock of the corporation incorporated in the tax haven country.
- (4) Pursuant to G.S. 143-59.2(b), the undersigned hereby certifies that none of the Contractor's officers, directors, or owners (if the Contractor is an unincorporated business entity) has been convicted of any violation of Chapter 78A of the General Statutes or the Securities Act of 1933 or the Securities Exchange Act of 1934 within 10 years immediately prior to the date of the bid solicitation.
- (5) Pursuant to G.S. 143B-139.6C, the undersigned hereby certifies that the Contractor will not use a former employee, as defined by G.S. 143B-139.6C(d)(2), of the North Carolina Department of Health and Human Services in the administration of a contract with the Department in violation of G.S. 143B-139.6C and that a violation of that statute shall void the Agreement.
- (6) The undersigned hereby certifies further that:
6. He or she is a duly authorized representative of the Contractor named below;
7. He or she is authorized to make, and does hereby make, the foregoing certifications on behalf of the Contractor; and
8. He or she understands that any person who knowingly submits a false certification in response to the requirements of G.S. 143-59.1 and -59.2 shall be guilty of a Class I felony.

Contractor's Name: \_\_\_\_\_

Contractor's Authorized Agent: Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Title \_\_\_\_\_

The witness should be present when the Contractor's Authorized Agent signs this certification and should sign and date this document immediately thereafter.

<b>Adolescent SBIRT - Appendix C</b>		
<b>Master Line Item Budget (Required)</b>		
<b>Budget Categories</b>	<b>07.01.2022 - 03.14.2023</b>	<b>TOTAL</b>
	Description	
<b>Human Resources</b>		
Salary/Wages		
Fringe Benefits		
HR/Other		
<b>Operational Expenses/Capital Outlays</b>		
<b>Supplies and Materials</b>		
SBIRT materials (hard copy)		
SBIRT materials (electronic)		
Furniture		
Other (explain)		
<b>Equipment</b>		
Communication		
Office		
IT		
Assistive Technology		
Other (explain)		
<b>Travel</b>		
Provider Staff		
<b>Utilities</b>		
Gas		
Electricity		
Telephone		
Water		
Other (explain)		
<b>Repair and Maintenance</b>		

<b>Master Line Item Budget (Required)</b>		
<b>Budget Categories</b>	<b>07.01.2022 - 03.14.2023</b>	<b>TOTAL</b>
<b>Staff Development (Provider Staff Only)</b>		
<b>Media/Communication/Public Affairs</b>		
Advertising		
Audiovisual presentations/multimedia/tv/radio presentations		
Logos		
Promotional items		
Publications		
Public service announcements and ads		
Reprints		
Text translation into another language		
Websites and web materials		
<b>Rent</b>		
Office Space		
Equipment		
Furniture		
Vehicles		
Other (explain)		
<b>Professional Services</b>		
Legal		
IT		
Accounting		
Payroll		
Security		
<b>Other</b>		
Audit Services		
Service Payments		
Insurance and Bonding		
Not Otherwise Classified		
<b>Subcontracting and Grants</b>		

<b>Master Line Item Budget (Required)</b>		
<b>Budget Categories</b>	<b>07.01.2022 - 03.14.2023</b>	<b>TOTAL</b>
<b>Total Budgeted Expenditures</b>		